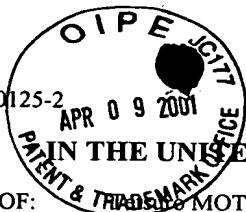


# 2

Docket No. 5244-0125-2



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: MOTOYAMA et al.

SERIAL NO: 09/453,936

GAU: 2756

FILED: 05/17/00

EXAMINER:

FOR: METHOD AND SYSTEM OF REMOTE DIAGNOSTIC, CONTROL AND INFORMATION COLLECTION USING A DYNAMIC LINKED LIBRARY OF MULTIPLE FORMATS AND MULTIPLE PROTOCOLS WITH RESTRICTION...

**INFORMATION DISCLOSURE/RELATED CASE STATEMENT UNDER 37 CFR 1.97**

ASSISTANT COMMISSIONER FOR PATENTS  
WASHINGTON, D.C. 20231

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APR 10 2001  
Technology Center 2100

SIR:

Applicant(s) wish to disclose the following information.

**REFERENCES**

- ☐ The applicant(s) wish to make of record the references listed on the attached form PTO-1449. Copies of the listed references are attached, where required, as are either statements of relevancy or any readily available English translations of pertinent portions of any non-English language references.
- ☐ A check is attached in the amount required under 37 CFR §1.17(p).

**RELATED CASES**

- ☒ Attached is a list of applicant's pending application(s) or issued patent(s) which may be related to the present application. A copy of the claims and drawings of the pending application(s) is attached.
- ☐ A check is attached in the amount required under 37 CFR §1.17(p).

**CERTIFICATION**

- ☐ Each item of information contained in this information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.
- ☒ No item of information contained in this information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application or, to the knowledge of the undersigned, having made reasonable inquiry, was known to any individual designated in 37 CFR §1.56(c) more than three months prior to the filing of this statement.

**DEPOSIT ACCOUNT**

- ☒ Please charge any additional fees for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to deposit account number 15-0030. A duplicate copy of this sheet is enclosed.



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Respectfully submitted,

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